



# APPLICATION FOR RESERVATION OF EXCLUSIVE USE OF CORPORATE NAME

State Form 26233 (R5 / 1-03)

Approved by State Board of Accounts, 1995

**TODD ROKITA**  
SECRETARY OF STATE  
CORPORATIONS DIVISION  
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**INSTRUCTIONS:** Use 8 1/2" x 11" white paper for attachments.  
Present original and one (1) copy to address in upper right corner of this form.  
Please TYPE or PRINT.  
Please visit our office on the web at [www.sos.in.gov](http://www.sos.in.gov).

Indiana Code 23-1-23-1 and 23-1-23-2

**FILING FEE: \$20.00**

Proposed name to be reserved	
Name of applicant	
Address of applicant (number and street, city, state, ZIP code)	
Signature of applicant	Printed name of applicant

## FOR USE BY SECRETARY OF STATE OFFICE ONLY

☐ The name is available and reserved for 120 days from the date stamped on this application.

☐ The name is indistinguishable from a name on the records of the Secretary of State and is therefore unavailable.

**NOTE:** The owner of the reserved name may transfer the reservation to another person by delivering to the Secretary of State a signed notice of the transfer. The notice must state the name and address of the transferee and the original approval date or have an attached copy of the original file-marked application for reservation of a corporate name.

**NOTE:** The Articles of Incorporation or Organization must have attached a copy of the file marked Application for Reservation of a Corporate Name.